

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000093588

Entity Name: LA VUE OPTICAL INC.

FILED
Oct 02, 2007
Secretary of State

Current Principal Place of Business:

5175 NE 2ND AVE
MIAMI, FL 33137

New Principal Place of Business:

560 NW 165TH STREET ROAD
MIAMI, FL 33169

Current Mailing Address:

5175 NE 2ND AVE
MIAMI, FL 33137

New Mailing Address:

75 NE 150TH STREET
MIAMI, FL 33167

FEI Number: 72-1570096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GEORGE, ELLE L
281 NE 57TH STREET
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

DERISCAT MD, GUERLINE
560 NW 165TH STREET ROAD
MIAMI, FL 33169 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GUERLINE DERISCAT MD

10/02/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ADRAS, ADRESSANT
Address: 12120 NW 2ND AVE
City-St-Zip: N. MIAMI, FL 33168

Title: DV () Delete
Name: GEORGE, ELLE L
Address: 281 NE 57TH STREET
City-St-Zip: MIAMI, FL 33137

Title: DV () Delete
Name: FALDONY, SANTOS
Address: 281 NE 57TH STREET
City-St-Zip: MIAMI, FL 33137

Title: DV () Delete
Name: MONESTIME, DARA TERACIA
Address: 281 NE 57TH STREET
City-St-Zip: MIAMI, FL 33137

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GEORGE, ELLE
Address: 560 NW 165TH STREET ROAD
City-St-Zip: MIAMI, FL 33169

Title: D (X) Change () Addition
Name: DERISCAT MD, GUERLINE
Address: 560 NW 165TH STREET ROAD
City-St-Zip: MIAMI, FL 33169

Title: D (X) Change () Addition
Name: MCLEARY, ROY A
Address: 560 NW 165TH STREET ROAD
City-St-Zip: MIAMI, FL 33169

Title: VP (X) Change () Addition
Name: PERICLES MD, DENET
Address: 560 NW 165TH STREET ROAD
City-St-Zip: MIAMI, FL 33169

Title: P () Change (X) Addition
Name: EDWARDS, WILLIAM J
Address: 560 NW 165TH STREET ROAD
City-St-Zip: MIAMI, FL 33169

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELLE GEORGE

D

10/02/2007

Electronic Signature of Signing Officer or Director

Date